Case 25-10815-amc Doc 1 Filed 02/28/25 Entered 02/28/25 10:01:49 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF PENNSYLVANIA		
Case number (if known)	Chapter you are filing under:	
	⊠ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:		Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin	e the name that is on r government-issued ure identification (for mple, your driver's use or passport).	Joseph First name  D. Middle name  Rishe	Jenneh First name  E. Middle name  Rishe
		itification to your sting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	Inclumaio	other names you have d in the last 8 years ude your married or den names and any		
		umed, trade names and ng business as names.		
	any such	NOT list the name of separate legal entity n as a corporation, nership, or LLC that is filing this petition.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N)	xxx-xx-7643	xxx-xx-3995

Debtor 1 Joseph D. Rishe
Debtor 2 Jenneh E. Rishe

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Your Employer Identification Number (EIN), if any.					
	(Liv), ii diiy.	EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		336 S. Juniper Street				
		Philadelphia, PA 19107  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Philadelphia				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	<ul> <li>Over the last 180 days before filing this petition,</li> <li>I have lived in this district longer than in any other district.</li> </ul>	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Deb	tor 2	Jenneh E. Rishe				_	Case numbe	「 (if known)
Part	2:	Tell the Court About Y	our Bankr	uptcy Ca	se			
7.	Bank	hapter of the ruptcy Code you are sing to file under		0)). Also, ter 7 ter 11 ter 12	orief description of each, see <i>N</i> go to the top of page 1 and ch			42(b) for Individuals Filing for Bankruptcy
8.	How	you will pay the fee	aborder a production order a production of the control of the cont	at how your how your life your e-printed ed to pay Filing Fequest that so not requise to you	u may pay. Typically, if you are attorney is submitting your pay address.  The fee in installments. If yo e in Installments (Official Form t my fee be waived (You may uired to, waive your fee, and m	e paying the ferment on your but choose this candidate.  103A).  request this open do so only in the ferment on your but the ferment of the f	e yourself, you moehalf, your attor option, sign and a otion only if you a f your income is see in installments	rk's office in your local court for more details ay pay with cash, cashier's check, or money ney may pay with a credit card or check with attach the <i>Application for Individuals to Pay</i> are filing for Chapter 7. By law, a judge may, less than 150% of the official poverty line that b. If you choose this option, you must fill out be and file it with your petition.
9.	bankı	you filed for ruptcy within the years?	⊠ No. □ Yes.					
				District		When		Case number
				District		When		Case number
				District		When		Case number
10.	cases filed I not fil you, o	ny bankruptcy s pending or being by a spouse who is ling this case with or by a business er, or by an te?	⊠ No □ Yes.					
				Debtor				Relationship to you
				District		When		Case number, if known
				Debtor			_	Relationship to you
				District		When		Case number, if known
11.		ou rent your ence?	⊠ No. □ Yes.	Go to li Has yo	ur landlord obtained an evictio No. Go to line 12.	, , ,	·	ainst You (Form 101A) and file it as part of

Joseph D. Rishe

Debtor 1

	tor 1 Joseph D. Rishe tor 2 Jenneh E. Rishe			Case number (if known)				
Par	13: Report About Any Bu	ısinesses	You Own as a Sole Propriet	or				
12.	Are you a sole proprietor of any full- or part-time business?	⊠ No.	⊠ No. Go to Part 4.					
		☐ Yes.	Yes. Name and location of business					
	e & ZIP Code							
	separate sheet and attach it to this petition.		Check the appropriate box	x to describe your business:				
				ess (as defined in 11 U.S.C. § 101(27A))				
				Estate (as defined in 11 U.S.C. § 101(51B))				
				efined in 11 U.S.C. § 101(53A)) r (as defined in 11 U.S.C. § 101(6))				
			None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	deadline. operation in 11 U.S  ☑ No. ☐ No. ☐ Yes. ☐ Yes.	s. If you indicate that you are and cash-flow statement, and fels.C. § 1116(1)(B).  I am not filing under Chapter Code.  I am filing under Chapter I do not choose to proceed.  I am filing under Chapter I choose to proceed under	I am not filing under Chapter 11.  I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
Par	Report if You Own or	Have Any	Hazardous Property or Any	y Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	⊠ No. ☐ Yes.	What is the hazard?					
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?					
				Number, Street, City, State & Zip Code				

Joseph D. Rishe

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Debtor 1 Joseph D. Rishe
Debtor 2 Jenneh E. Rishe Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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I am not required to receive a briefing about credit
counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 Joseph D. Rishe tor 2 Jenneh E. Rishe				Case nu	mber (if known)		
Par	6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.					
		16b.	<ul> <li>✓ Yes. Go to line 17.</li> <li>Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.</li> <li>✓ No. Go to line 16c.</li> <li>✓ Yes. Go to line 17.</li> </ul>					
		16c.	_	you owe that are not consu	ımer debts or bus	siness debts		
17. Are you filing under								
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?			er 7. Do you estimate that a be available to distribute to		property is excluded and administrative expenses tors?		
18.	How many Creditors do you estimate that you owe?	<ul><li>□ 1-49</li><li>□ 50-99</li><li>□ 100-19</li><li>□ 200-99</li></ul>		☐ 1,000-5,000 ☐ 5001-10,00 ☐ 10,001-25,0	0	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$50,00 □ \$100,0	□ \$0 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$500,000 ☑ \$500,001 - \$1 million		- \$10 million 1 - \$50 million 1 - \$100 million 01 - \$500 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion		
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,00 □ \$50,000,00	\$500,000,001 - \$1 billion			
Par	7: Sign Below							
For you		I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I understa bankrupto and 3571	and making a false state by case can result in fine	ement, concealing property,	ited States Code, specified in this petition. , or obtaining money or property by fraud in connection with a sonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Joseph	ph D. Rishe D. Rishe of Debtor 1		Jenneh E. R Signature of D	ishe		
		Executed	on February 28, 2	2025	Executed on	February 28, 2025 MM / DD / YYYY		

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Debtor 1 Debtor 2	Joseph D. Rishe Jenneh E. Rishe		Cas	e number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in th under Chapter 7, 11, 12, or 13 of title 11, U for which the person is eligible. I also cert	nited States Code, and have e		apter
	not represented by ey, you do not need page.	342(b) and, in a case in which § 707(b)(4)(l in the schedules filed with the petition is inc		o knowledge after an inquiry that the inform	ation
		/s/ Brad Sadek	Date	February 28, 2025	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Brad Sadek			
		Printed name			
		Sadek Law Offices			
		Firm name			
		1500 JFK Blvd. Ste 220			
		Philadelphia, PA 19102			
		Number, Street, City, State & ZIP Code			<u></u>
		Contact phone (215) 545-0008	Email address	Brad@sadeklaw.com	

90488 PA Bar number & State Case 25-10815-amc Doc 1 Filed 02/28/25 Entered 02/28/25 10:01:49 Desc Main Document Page 8 of 54

			Docum	nent	Page 8 of 54			
Fill	in this inforn	nation to identify your	case:					
Deb	tor 1	Joseph D. Rishe						
200		First Name	Middle Name		Last Name			
	tor 2	Jenneh E. Rishe	Middle Mann		LastName			
(Spot	use if, filing)	First Name	Middle Name		Last Name			
Unit	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT	OF PENN	NSYLVANIA			
Cas	e number							
(if kn								k if this is an
							amen	ded filing
Off	ficial Fo	rm 106Sum						
			and Liabilities a	nd Ce	rtain Statistical Informatio	n		12/15
					ng together, both are equally responsib		pplyi	ng correct
					mation on this form. If you are filing am	ended s	chedu	ıles after you file
your	original fori	iis, you iiiust iiii out a	iew Summary and the	ck tile bo	ox at the top of this page.			
Part	1: Summ	arize Your Assets						
						`	our a	ssets
						\	/alue o	of what you own
1.		JB: Property (Official Fo						
	1a. Copy lin	e 55, Total real estate, fr	om Schedule A/B				\$	511,655.40
	1b. Copy lin	e 62, Total personal pro	perty, from Schedule A/E	3			\$	54,795.70
	1c. Copy line	e 63, Total of all property	on Schedule A/B				\$	566,451.10
Part	2: Summ	arize Your Liabilities						
							/a l:	abilition
								abilities It you owe
2	Sahadula D	· Craditara Wha Hava Cl	nima Sagurad by Prance	tu (Officia	LEarm 106D)			•
2.		: Creditors Who Have Cl e total you listed in Colur			om of the last page of Part 1 of Schedule	D	\$	529,089.00
3.		F: Creditors Who Have						
	3a. Copy th	e total claims from Part	1 (priority unsecured claim	ims) from	line 6e of Schedule E/F		\$	0.00
	3b. Copy th	e total claims from Part	2 (nonpriority unsecured	claims) fr	om line 6j of <i>Schedule E/F</i>		\$	804,304.00
				,	•			,
					Your total liabili	ties \$		1,333,393.00
					rour total habit	"- a		1,333,393.00
			_					
Part	3: Summ	arize Your Income and	Expenses					
4.		Your Income (Official Fo					_	7.050.00
	Copy your c	combined monthly income	e from line 12 of <i>Schedu</i>	ıle I			\$	7,353.00
5.	Schedule J:	Your Expenses (Official	Form 106J)					
	Copy your n	nonthly expenses from li	ne 22c of Schedule J				\$	7,353.00
Part	4: Answe	er These Questions for	Administrative and Sta	atistical R	Records			
6.	Are you fili	ng for bankruptcy unde	er Chanters 7 11 or 13	2				
<b>J</b> .			• • • •		s box and submit this form to the court wit	h your ot	her sc	hedules.
	⊠ Yes							

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Debtor 2	Joseph D. Rishe Jenneh E. Rishe	Case number (if known)	
	n the <i>Statement of Your Current Monthly Income</i> : Cop 1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 L	, ,	\$ 8,719.54

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	428,560.00
<ol><li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li></ol>	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	428,560.00

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				Docume	nt Page 10 of 54		_	
Fill i	n this informa	ition to identify	your case an	d this filing:				
Debt	or 1	Joseph D. R	ishe					
DCDI	01 1	First Name		liddle Name	Last Name			
Debt		Jenneh E. R						
(Spou	se, if filing)	First Name	N	liddle Name	Last Name			
Unite	ed States Bank	ruptcy Court for	the: EASTE	RN DISTRICT OF	PENNSYLVANIA			
Case	number							☐ Check if this is an
Ouse								amended filing
Դ <del>ք</del> ք	icial Ear	∞ 106A/E	•					
_		<u>n 106A/E</u>	-					
<u> 5C</u>	<u>hedule</u>	A/B: Pi	operty					12/15
	er every questic	on.	•		n. On the top of any additional pages • You Own or Have an Interest In	, write your n	ame and case	number (ii known).
_	No. Go to Part 2. Yes. Where is t							
1.1				What is the	property? Check all that apply			
	336 S. Junip	oer Street		_	e-family home			ims or exemptions. Put
-	Street address, if a	available, or other des	cription	Duple	ex or multi-unit building			I claims on Schedule D: as Secured by Property.
				Cond	lominium or cooperative			
					ufactured or mobile home	Current va	lue of the	Current value of the
_	Philadelphia	a PA	19107	Land		entire prop		portion you own?
	City	State	ZIP Code	☐ Inves	stment property	<u>\$5</u>	11,655.40	\$511,655.40
				☐ Other			Describe the nature of your ownership interests (such as fee simple, tenancy by the entiretie	
					interest in the property? Check one		e), if known.	mey by the chineties, or
	Dhile delekt	_		☐ Debto	or 1 only			
-	Philadelphia	<u>а</u> 			or 2 only			
	County				or 1 and Debtor 2 only			munity property
				<del></del>	ast one of the debtors and another	,	structions)	
					nation you wish to add about this itel entification number:	m, such as io	cai	
				Current v sale.	value represents Realtor.com	value (\$50	68,506) less	10% cost of
<u> </u>	التاج حالة المام	alica ef 41			untulas fuera Dant 4 June Levelle	4!		
		-	-	-	entries from Part 1, including any			\$511,655.40
-	. 5 ,							, , , , , , , , , , , , , , , , , , , ,

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 25-10815-amc Doc 1 Filed 02/28/25 Entered 02/28/25 10:01:49 Desc Main Page 11 of 54 Document Debtor 1 Joseph D. Rishe Jenneh E. Rishe Debtor 2 Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Do not deduct secured claims or exemptions. Put 3.1 Make: Nissan Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. **JUKE** Model: ☐ Debtor 1 only 2014 ☐ Debtor 2 only Current value of the Current value of the 90,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$2,204.00 \$2,204.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ⊠ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,204.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No X Yes. Describe..... Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$700 or less. \$3,500.00 7 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No 🛛 Yes. Describe..... Various used televisions, mobile devices, and computers, each valued at \$700 or less. \$500.00

#### 8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

⊠ No

☐ Yes. Describe.....

#### 9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☑ No

Yes. Describe.....

#### 10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

⊠ No

Yes. Describe.....

Debtor 1 Debtor 2	Joseph D. R Jenneh E. R			Case number (if known,	)
☐ No		othes, fur	s, leather coats, designe	r wear, shoes, accessories	
	s. Describe		is used articles of clo I at \$700 or less.	othing, shoes, and accessories, each	\$750.00
☐ No	•		stume jewelry, engagements	ent rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver \$100.00
Exan ⊠ No □ Yes 14. <b>Any</b> ⊠ No		nd house	hold items you did not	already list, including any health aids you did not list	
15. <b>Add</b> <b>for</b> l	Part 3. Write that	of all of y number l	rour entries from Part 3 nere	s, including any entries for pages you have attached	\$4,850.00
	escribe Your Finan own or have any I		s quitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
⊠ No	nples: Money you	-	our wallet, in your home,	in a safe deposit box, and on hand when you file your peti	tion
Exan				; certificates of deposit; shares in credit unions, brokerage the same institution, list each.	houses, and other similar
☐ No ⊠ Yes	S			Institution name:	
		17.1.	Checking	TD Bank	\$10,000.00
		17.2.	Checking (8722)	JP Morgan Chase Bank, N.A.	\$0.00
		17.3.	Savings (9886)	JP Morgan Chase Bank, N.A.	\$0.00
		17.4.	Other financial account	Paypal	\$0.00
		17.5.	Other financial account	Venmo	\$0.00
		17.6.	Investor Checking (1550)	Charles Schwab Bank	\$2,000.00

Official Form 106A/B

Debtor 1 Debtor 2	Joseph D. Rishe Jenneh E. Rishe			Case number	(if known)	
	17	7.7. Checking (2155)	JP Morgan Chase Bank, N.	Α.		\$0.00
	17	Other financial	Venmo			\$0.00
		.o. account	Verimo			Ψ0.00
<i>Exam</i> □ No	ls, mutual funds, or poples: Bond funds, investigation		erage firms, money market accounts			
△ 163.			Amazon One Medical (to be paid	d in February	2026)	\$9,100.00
and jo □ No	oint venture	•	rated and unincorporated business	ses, including	an interest in a	ո LLC, partnership,
⊠ Yes.	·	ation about them Name of entity: Cloud Studio Inc.	<del></del>	% of owners 100	hip: %	\$0.00
		Cloud Studio Solution	ns Inc.	100	%	\$0.00
<i>Exam</i> □ No	. List each account sep Ty	ERISA, Keogh, 401(k), 403	3(b), thrift savings accounts, or other Institution name: Fidelity	pension or prof	ît-sharing plans	\$2,390.44
		D3(b) (6016)	Fidelity			\$0.00
	De	efined Contribution Pl 988)	lan Fidelity			\$0.00
	45	57(b) (5270)	Fidelity			\$0.00
	40	01(k) (7790)	Fidelity			\$22,492.39
	IR	RA (9349)	Fidelity			\$1,758.87
Your s <i>Exam</i> ⊠ No		oosits you have made so th	nat you may continue service or use f ublic utilities (electric, gas, water), tele Institution name or individual:			others
_		periodic payment of money	y to you, either for life or for a number	r of years)		
⊠ No □ Yes.	lssuer	name and description.				
26 U.S ⊠ No	.C. §§ 530(b)(1), 529A	(b), and 529(b)(1).	alified ABLE program, or under a qualified ABLE program and a qua			
25. Trust	ts, equitable or future	interests in property (ot	her than anything listed in line 1), a	and rights or p	owers exercisa	ble for your benefit

Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit
 No

# Case 25-10815-amc Doc 1 Filed 02/28/25 Entered 02/28/25 10:01:49 Desc Main Document Page 14 of 54 Joseph D. Rishe

Debtor 1 Debtor 2	Joseph D. Rishe Jenneh E. Rishe	Case number (if known)	
☐ Ye	s. Give specific information about them		
Exar	nts, copyrights, trademarks, trade secrets, and other intellectual poples: Internet domain names, websites, proceeds from royalties and li		
⊠ No □ Ye	s. Give specific information about them		
<i>Exar</i> ⊠ No	nses, franchises, and other general intangibles nples: Building permits, exclusive licenses, cooperative association holes. Give specific information about them	dings, liquor licenses, professional licenses	
Money o	r property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
⊠ No	refunds owed to you  Signature: Give specific information about them, including whether you already	filed the returns and the tax years	
<i>Exar</i> ⊠ No	ily support  nples: Past due or lump sum alimony, spousal support, child support, n  Give specific information	naintenance, divorce settlement, property se	ettlement
<i>Exar</i> ⊠ No	er amounts someone owes you  nples: Unpaid wages, disability insurance payments, disability benefits, benefits; unpaid loans you made to someone else  Give specific information	, sick pay, vacation pay, workers' compens	ation, Social Security
<i>Exar</i> ⊠ No	ests in insurance policies  nples: Health, disability, or life insurance; health savings account (HSA	.); credit, homeowner's, or renter's insurance	
∐ Ye:	s. Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
If you some ⊠ No	interest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insuratione has died.  Give specific information	nce policy, or are currently entitled to receive	e property because
<i>Exar</i> ⊠ No	ms against third parties, whether or not you have filed a lawsuit on nples: Accidents, employment disputes, insurance claims, or rights to see. Describe each claim		
⊠ No	er contingent and unliquidated claims of every nature, including c	ounterclaims of the debtor and rights to s	set off claims
_	financial assets you did not already list		
	s. Give specific information	_	
	the dollar value of all of your entries from Part 4, including any e Part 4. Write that number here		\$47,741.70
Part 5:	escribe Any Business-Related Property You Own or Have an Interest In. Li	st any real estate in Part 1.	
	u own or have any legal or equitable interest in any business-related prope So to Part 6.	erty?	

☑ No. Go to Part 6.☐ Yes. Go to line 38.

Official Form 106A/B

	tor 1 tor 2	Joseph D. Rishe Jenneh E. Rishe		Case number (if known)	
Part		cribe Any Farm- and Commercial Fishing-Related Property You u own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.	No. G	own or have any legal or equitable interest in any farmoio to Part 7.  Go to line 47.	or commercial fishi	ng-related property?	
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Σ	<i>Exampl</i> ☑ No	have other property of any kind you did not already list es: Season tickets, country club membership Sive specific information	?		
		e dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1:	Total real estate, line 2			\$511,655.40
56.	Part 2:	Total vehicles, line 5	\$2,204.00		
57.	Part 3:	Total personal and household items, line 15	\$4,850.00		
58.	Part 4:	Total financial assets, line 36	\$47,741.70		
		Total business-related property, line 45	\$0.00		
		Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7:	Total other property not listed, line 54 +	\$0.00		
62.	Total p	personal property. Add lines 56 through 61	\$54,795.70	Copy personal property tot	sal <b>\$54,795.70</b>
63.	Total o	of all property on Schedule A/B. Add line 55 + line 62			\$566,451.10

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this information to identify your case:								
Debtor 1	Joseph D. Rishe							
	First Name	Middle Name	Last Name					
Debtor 2	Jenneh E. Rishe							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:  Case number		EASTERN DISTRICT C	OF PENNSYLVANIA					
(if known)				_	eck if this is an nended filing			

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt								
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 L	J.S.C. § 522(b)(3)						
	☑ You are claiming federal exemptions. 1	1 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption						
		Copy the value from Schedule A/B	Check only one box for each exemption.							
	2014 Nissan JUKE	\$2,204.00	$\boxtimes$	\$2,204.00	11 U.S.C. § 522(d)(2)					
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	Various used pieces of furniture,	\$3,500.00	$\boxtimes$	\$3,500.00	11 U.S.C. § 522(d)(3)					
	furnishings, appliances, linens, and other similar items, each valued at \$700 or less. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						
_	Various used televisions, mobile	\$500.00	$\boxtimes$	\$500.00	11 U.S.C. § 522(d)(3)					
	devices, and computers, each valued at \$700 or less. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit						
	Various used articles of clothing,	\$750.00	$\boxtimes$	\$750.00	11 U.S.C. § 522(d)(3)					
	shoes, and accessories, each valued at \$700 or less. Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit						
	Various used pieces of jewelry.	\$100.00	$\boxtimes$	\$100.00	11 U.S.C. § 522(d)(4)					
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit						

	btor 2 Jenneh E. Rishe			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Charles Schwab Bank Line from Schedule A/B: 17.6	\$2,000.00	$\boxtimes$	\$2,000.00	11 U.S.C. § 522(d)(5)	
L	Line from Schedule A/B: 17.6			100% of fair market value, up to any applicable statutory limit		
	TD Bank	\$10,000.00	$\boxtimes$	\$10,000.00	11 U.S.C. § 522(d)(5)	
Li	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	Stock options in Amazon One	\$9,100.00	$\boxtimes$	\$9,100.00	11 U.S.C. § 522(d)(5)	
	Medical (to be paid in February 2026) Line from Schedule A/B: 18.1			100% of fair market value, up to any applicable statutory limit		
	Fidelity	\$1,758.87	$\boxtimes$	\$1,758.87	11 U.S.C. § 522(d)(12)	
	Line from Schedule A/B: 21.6			100% of fair market value, up to any applicable statutory limit		
	Fidelity Line from Schedule A/B: 21.1	\$2,390.44	$\boxtimes$	\$2,390.44	11 U.S.C. § 522(d)(12)	
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	Fidelity	\$22,492.39	$\boxtimes$	\$22,492.39	11 U.S.C. § 522(d)(12)	
Line from Schedule A/B: 21.5				100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/25 and every 3   ☑ No ☐ Yes. Did you acquire the property covered	years after that for ca	ises fil	·	,	
	□ No □ Yes					

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		Document	Page 1	<u>.8 of 54</u>	_	
Fill in this information to id	lentify you	r case:				
Debtor 1 Joseph	n D. Rishe					
First Name		Middle Name	Last Name			
Debtor 2 <b>Jenneh</b>	n E. Rishe					
(Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruntey Co	unt for the	EASTERN DISTRICT OF DENNI	CVI VANII	۸		
United States Bankruptcy Co	ourt for the:	EASTERN DISTRICT OF PENNS	SYLVAINIA	4		
Case number						
(if known)						if this is an
					ameno	led filing
Official Form 106D						
Official Form 106D						
Schedule D: Cre	ditors	Who Have Claims S	ecure	ed by Property	<i>l</i>	12/15
		two married people are filing together number the entries, and attach it to th				
known).		,				`
1. Do any creditors have claims	secured by	your property?				
<ul><li>☐ No. Check this box ar</li><li>☒ Yes. Fill in all of the in</li></ul>		is form to the court with your other solelow.	chedules.	You have nothing else to	report on this form.	
Part 1: List All Secured	Claims					
		save there are accounted alaims list the aredi	lar aanarat	Column A	Column B	Column C
for each claim. If more than one	e creditor has	nore than one secured claim, list the credit a particular claim, list the other creditors	in Part 2. A		Value of collateral	Unsecured
much as possible, list the claims	in alphabetic	al order according to the creditor's name.		Do not deduct the	that supports this	portion
2.1 City of Philadelphia	,	Describe the property that secures the	a claim:	value of collateral. \$100.00	s511,655.40	If any <b>\$100.00</b>
Creditor's Name	<u> </u>	336 S. Juniper Street, Philade		Ψ100.00	ΨΟ11,000.40	Ψ100.00
Cround o Hame		PA	,			
1401 John. F Kenne	edv					
Blvd., 5th Floor	,	As of the date you file, the claim is: Chapply.	neck all that			
Philadelphia, PA 19	102	Contingent				
Number, Street, City, State & Z	ip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check or	ne.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mo	ortgage or s	secured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		car loan)  Statutory lien (such as tax lien, mech	anic's lien)			
At least one of the debtors an	d another	☐ Judgment lien from a lawsuit	u			
Check if this claim relates t	o a	☑ Other (including a right to offset)	Vater/Se	wer		
community debt						
Date debt was incurred		Last 4 digits of account numbe	r			
Pennymac Loan						
Services, LLC		Describe the property that secures the		\$528,989.00	\$511,655.40	\$17,333.60
Creditor's Name		336 S. Juniper Street, Philade	lphia,			
Attn: Corresponder		PA				
Unit PO Box 514387	7	As of the date you file, the claim is: Ch	neck all that			
Los Angeles, CA		apply.	ieck all tilat			
90051-4387 Number, Street, City, State & Z	in Codo	☐ Contingent ☐ Unliquidated				
Number, Street, City, State & 2	.ip Code	☐ Disputed				
Who owes the debt? Check or	ne.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mo car loan)	ortgage or s	secured		
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, mech	anic's lien)			
At least one of the debtors an		☐ Judgment lien from a lawsuit				
Check if this claim relates t community debt	о а	Other (including a right to offset)				
community dobt						
Date debt was incurred 202	3-08	Last 4 digits of account numbe	r <u>3527</u>	7		
Add the dollar value of your	entries in Co	olumn A on this page. Write that numbe	er here:	\$529,08	9.00	
If this is the last page of your	r form, add t	he dollar value totals from all pages.				

If this is the last page of your form, add the dollar value totals from all pages Write that number here:

\$529,089.00

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Debtor 1	Joseph D. Rishe			Case number (if known)	
Debtor 2	First Name Jenneh E. Rishe	Middle Name	Last Name		
	First Name	Middle Name	Last Name		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			Document	Page 20	of 54		
Fill	in this infor	mation to identify your c	ase:				
Doh	otor 1	Joseph D. Rishe					
Den	NOI I	First Name	Middle Name	Last Name			
Deb	otor 2	Jenneh E. Rishe					
	use if, filing)	First Name	Middle Name	Last Name			
Unit	ted States Ba	inkruptcy Court for the:	EASTERN DISTRICT OF PEN	NSYLVANIA			
_							
Cas (if kn	e number _					ПС	heck if this is an
(II KII							mended filing
Ωff	ioial Farn	∞ 106F/F					
		<u>n 106E/F</u>		<b>0</b> 1-1			40/45
Sc	nedule E	:/F: Creditors Wi	no Have Unsecured	Claims			12/15
Sche left. A name	dule D: Credit Attach the Core and case nur	ors Who Have Claims Secu ntinuation Page to this page mber (if known).	ed Leases (Official Form 106G). D red by Property. If more space is . If you have no information to rep	needed, copy	the Part you need, fill it out,	number the ent	ries in the boxes on the
Par	t 1: List A	II of Your PRIORITY Uns	ecured Claims				
	Do any credito No. Go to P	ors have priority unsecured Part 2.	claims against you?				
	☐ Yes.						
Par	t 2: List A	II of Your NONPRIORITY	' Unsecured Claims				
		ors have nonpriority unsecu					
	☐ No. You ha	ve nothing to report in this par	t. Submit this form to the court with	your other sche	dules.		
	⊠ Yes.						
	unsecured clai	m, list the creditor separately	ms in the alphabetical order of th for each claim. For each claim listed t the other creditors in Part 3.If you h	, identify what t	ype of claim it is. Do not list cla	aims already incl	luded in Part 1. If more
							Total claim
4.1	Amex		Last 4 digits of acc	ount number	7133		\$11,542.00
		y Creditor's Name pondence/Bankruptcy	When was the debt	in a was al O	2016-05		
		( 981535	when was the debt	incurred?	2010-03		
		o, TX 79998-1535					
		Street City State Zip Code	As of the date you	file, the claim	s: Check all that apply		
	Who incu	rred the debt? Check one.					
	□ Debtor	1 only	☐ Contingent				
	Debtor	•	☐ Unliquidated				
	<del></del>	1 and Debtor 2 only	Disputed				
		t one of the debtors and anot		ITY unsecure	d claim:		
	∐ Check debt	if this claim is for a comn	<del>_</del>	a out of a ser-	ration agraamant or diver th	ot vou didt	
		im subject to offset?	report as priority clai		ration agreement or divorce th	at you did fiot	
	⊠ No	220,000 10 0110001	,		g plans, and other similar debt	S	
	_ Yes		☐ Other. Specify	•	51 ,		
	_		, _				i

	2 Jenneh E. Rishe		Case number (if known)	
4.2	Amex	Last 4 digits of account number	9813	\$11,542.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy	When was the debt incurred?	2013-01	
	PO Box 981535	when was the debt incurred?	2013-01	
	El Paso, TX 79998-1535			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	□ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?  ☑ No	report as priority claims	a plane, and other similar debts	
		☐ Debts to pension or profit-sharin		
	Yes	☑ Other. Specify Open acco	unt	
4.3	Chase	Last 4 digits of account number	4101	\$30,345.00
4.0	Nonpriority Creditor's Name	_ Last 4 digits of account number		<del></del>
	MailCode LA4-7100	When was the debt incurred?	2016-12	
	700 Kansas Ln			
	Monroe, LA 71203-4774	_		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	 □ Yes	☐ Other. Specify Credit Card		
		Z Other. opeony		
4.4	Chase	Last 4 digits of account number	1824	\$24,000.00
	Nonpriority Creditor's Name	_		
	P.O. Box 15299	When was the debt incurred?		
	Wilmington, DE 19850	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☑ Debtor 1 and Debtor 2 only	Disputed	d alaims.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:	
	☐ Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	_ □ Yes	☐ Other. Specify Personal G	• •	
	<b>—</b> · · · ·		· · · · · ·	

	or 1 Joseph D. Rishe or 2 Jenneh E. Rishe	Case number (if known)				
4.5	Drexel University	Last 4 digits of account number		\$5,357.00		
	Nonpriority Creditor's Name 3141 Chestnut Street Philadelphia, PA 19104	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	<ul><li>☑ Debtor 1 and Debtor 2 only</li><li>☐ At least one of the debtors and another</li></ul>	☐ Disputed  Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?  ☒ No	report as priority claims	ration agreement or divorce that you did not			
	⊠ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Tuition	g pians, and other similar debts			
4.6	Main Line Health	_ Last 4 digits of account number		\$1,100.00		
	Nonpriority Creditor's Name 100 East Lancaster Avenue Wynnewood, PA 19096	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	Contingent				
	□ Debtor 2 only     □ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans	diami.			
	debt Is the claim subject to offset?	—	ration agreement or divorce that you did not			
	⊠ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	☑ Other. Specify Medical Bil	<u> </u>			
4.7	MOHELA Nonpriority Creditor's Name	Last 4 digits of account number	0523	\$85,602.00		
	P.O. Box 790233 Saint Louis, MO 63179	When was the debt incurred?	2022-09			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	□ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	Student loans	and the second and th			
	Is the claim subject to offset?	<ul> <li>Obligations arising out of a sepa report as priority claims</li> </ul>	ration agreement or divorce that you did not			
	⊠ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify				

	or 1 Joseph D. Rishe or 2 Jenneh E. Rishe		Case number (if known)			
4.8	MOHELA	Last 4 digits of account number	0523	\$89,652.00		
	Nonpriority Creditor's Name P.O. Box 790233 Saint Louis, MO 63179	When was the debt incurred?	2022-09-30			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	<ul><li>☐ Debtor 1 and Debtor 2 only</li><li>☐ At least one of the debtors and another</li></ul>	☐ Disputed  Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	⊠ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts			
4.9	MOHELA Nonpriority Creditor's Name	Last 4 digits of account number	6994	\$47,437.00		
	P.O. Box 790233 Saint Louis, MO 63179	When was the debt incurred?	2006-08-28			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	<ul><li>☐ Contingent</li><li>☐ Unliquidated</li></ul>				
	<ul><li>☐ Debtor 1 and Debtor 2 only</li><li>☐ At least one of the debtors and another</li></ul>	☐ Disputed Type of NONPRIORITY unsecured	I claim:			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	<ul><li>             ⊠ Student loans             □ Obligations arising out of a sepa report as priority claims         </li></ul>	ration agreement or divorce that you did not			
	⊠ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	g plans, and other similar debts			
4.1	MOHELA	Last 4 digits of account number	6960	\$42,175.00		
0	Nonpriority Creditor's Name P.O. Box 790233	When was the debt incurred?	2004-11-03	Ψ-2,170.00		
	Saint Louis, MO 63179  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed				
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured  ✓ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	⊠ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	g pians, and other similar debts			

otor 1 Joseph D. Rishe tor 2 Jenneh E. Rishe		Case number (if known)	
MOHELA	Last 4 digits of account number	6978	\$25,735.0
Nonpriority Creditor's Name	_ Last 4 digits of account number		<del>+20,100.0</del>
P.O. Box 790233	When was the debt incurred?	2005-08-29	
Saint Louis, MO 63179			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	⊠ Student loans		
debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement of alveree that you did not	
⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
 □ Yes			
	_ , ,		
MOHELA	Last 4 digits of account number	7000	\$24,368.0
Nonpriority Creditor's Name	_		
P.O. Box 790233	When was the debt incurred?	2007-08-27	
Saint Louis, MO 63179		<u> </u>	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☑ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	.a.a. agreement of arrenee analyea ara net	
⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
MOHELA	_ Last 4 digits of account number	0324	\$10,456.0
Nonpriority Creditor's Name			
P.O. Box 790233	When was the debt incurred?	2007-10-01	
Saint Louis, MO 63179	_		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
□ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☑ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	•	
⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	☐ Other Specify		

or 1 Joseph D. Rishe or 2 Jenneh E. Rishe		Case number (if known)	
MOHELA	Last 4 digits of account number	0814	\$4,348.0
Nonpriority Creditor's Name			
P.O. Box 790233	When was the debt incurred?	2008-08-14	
Saint Louis, MO 63179	_		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
□ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
⊠ No	Debts to pension or profit-sharin		
Yes	Other. Specify		
MOHELA	Last 4 digits of account number	0816	\$3.691.0
Nonpriority Creditor's Name	_ Last 4 digits of account number		40,00111
P.O. Box 790233	When was the debt incurred?	2007-08-16	
Saint Louis, MO 63179			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
☑ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☑ Student loans	u olulli.	
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement of alvorse that you did not	
⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes			
MOHELA	_ Last 4 digits of account number	<u>6986</u>	\$2,752.0
Nonpriority Creditor's Name		2000 20 25	
P.O. Box 790233	When was the debt incurred?	2006-06-05	
Saint Louis, MO 63179	_		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
□ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify		

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Debto Debto	r 1 Joseph D. Rishe r 2 Jenneh E. Rishe		Case number (if known)	
4.1 7	MOHELA	_ Last 4 digits of account number	0815	\$2,153.00
	Nonpriority Creditor's Name P.O. Box 790233 Saint Louis MO 63179	When was the debt incurred?	2006-08-15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes	report as priority claims  ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
4.1	MOHELA	Last 4 digits of account number	0814	\$2,103.00
	Nonpriority Creditor's Name P.O. Box 790233 Saint Louis, MO 63179	When was the debt incurred?	2008-08-14	<b>4</b> -,
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	<ul><li>☑ Debtor 1 only</li><li>☐ Debtor 2 only</li></ul>	<ul><li>☐ Contingent</li><li>☐ Unliquidated</li></ul>		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?  ☑ No	<ul> <li>☑ Student loans</li> <li>☐ Obligations arising out of a sepa report as priority claims</li> <li>☐ Debts to pension or profit-sharin</li> </ul>	ration agreement or divorce that you did not	
	Yes		g plane, and other ominiar dobte	
l.1 )	Nelnet	Last 4 digits of account number	8943	\$2,308.00
	Nonpriority Creditor's Name PO Box 82505 Lincoln, NE 68501	When was the debt incurred?	2009-08-18	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only☐ Debtor 2 only☐	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		d claim: ration agreement or divorce that you did not	
	Is the claim subject to offset? ☑ No ☐ Yes	report as priority claims  ☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	

	or 1 Joseph D. Rishe or 2 <mark>Jenneh E. Rishe</mark>		Case number (if known)	
4.2	Malasa		0440	<b>*0.407.00</b>
0	Nelnet Nonpriority Creditor's Name	_ Last 4 digits of account number	9143	\$2,197.00
	PO Box 82505	When was the debt incurred?	2009-08-27	
	Lincoln, NE 68501	When was the debt incurred?	2003-00-27	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Oncok all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	•	•		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.	
	<del>_</del>	• • • • • • • • • • • • • • • • • • • •	d Claim:	
	☐ Check if this claim is for a community debt	⊠ Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Пон о н		
	☐ res	Other. Specify		
4.2	Nelnet	Lord A. P. Novelle and a control of	0042	\$879.00
1	Nonpriority Creditor's Name	_ Last 4 digits of account number	9043	\$079.00
	PO Box 82505	Marie and the debates and to	2009-08-18	
	Lincoln, NE 68501	When was the debt incurred?	2009-00-10	
	,	As of the date you file, the claim	is: Chock all that apply	
	Number Street City State Zip Code	As of the date you me, the claim	S. Oneck all that apply	
	Who incurred the debt? Check one.			
	☑ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	⊠ Student loans		
			ration agreement or divorce that you did not	
	Is the claim subject to offset?  M No.	report as priority claims		
	⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.2	Natural		0000	\$00.704.00
2	Nelnet	_ Last 4 digits of account number		\$82,704.00
	Nonpriority Creditor's Name		2022.00	
	PO Box 82505	When was the debt incurred?	2022-09	
	Lincoln, NE 68501			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☑ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☑ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		

Debto Debto	r 1 Joseph D. Rishe r 2 Jenneh E. Rishe	Case number (if known)	
1.2			
3	PECO	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name		
	Attn: Bankruptcy	When was the debt incurred?	
	2301 Market Street		
	Philadelphia, PA 19103	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☑ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	⊠ No	Debts to pension or profit-sharing plans, and other similar debts	
	<del>_</del>		
	Yes	☑ Other. Specify <u>Utility Bill</u>	
.2			
	Penn Medicine	Last 4 digits of account number	\$1,500.00
	Nonpriority Creditor's Name		
	PO Box 824406	When was the debt incurred?	
	Philadelphia, PA 19182	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	□ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	⊠ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☑ Other. Specify Medical Bill	
.2			
	Philadelphia Gas Works	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name	Miles and the delication and the	
	800 W. Montgomery Avenue, 3F Philadelphia, PA 19122	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☑ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	⊠ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☑ Other. Specify Utility Bill	
	□ 193	Caron. Openly	

	1 Joseph D. Rishe 2 <mark>Jenneh E. Rishe</mark>		Case number (if known)		
4.2				\$1,600.00	
6	Quest Diagnostics Nonpriority Creditor's Name	Last 4 digits of account number	Last 4 digits of account number		
	500 Plaza Drive Secaucus, NJ 07094	When was the debt incurred?		-	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	od claim:		
	☐ Check if this claim is for a community	Student loans	eu Claiin.		
	debt		paration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	⊠ No	☐ Debts to pension or profit-shari	ing plans, and other similar debts		
	Yes	Other. Specify Medical B	ill	-	
4.2	Sofi Lending Corp/Mohela	l and d dissipated and account accompany	· 0736	\$8,558.00	
7	Nonpriority Creditor's Name	Last 4 digits of account number	0730	ψ0,330.00	
	Attn: Bankruptcy	When was the debt incurred?	2024-12	_	
	633 Spirit Dr Chesterfield, MO 63005-1243				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☑ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed	ad alabas		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecure  ☐ Student loans	ed claim:		
	debt	<del></del>	paration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	ration agreement of alveree that year and her		
	⊠ No	☐ Debts to pension or profit-shari	ing plans, and other similar debts		
	Yes	☑ Other. Specify Installmer	nt account	-	
4.2					
8	U.S. Small Business Administration  Nonpriority Creditor's Name	Last 4 digits of account number	·	\$280,000.00	
	Philadelphia District Office	When was the debt incurred?		_	
	ATTN: District Counsel				
	660 American Avenue, Suite 301				
	King of Prussia, PA 19406	As of the date you file the eleim	in Charle all that apply		
	Number Street City State Zip Code	As of the date you file, the claim	т is: Спеск ан that арргу		
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
		Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		paration agreement or divorce that you did not		
	Is the claim subject to offset?  ☑ No	report as priority claims  ☐ Debts to pension or profit-shari	ing plane, and other similar debts		
		☐ Debts to perision of profit-shari	•		
	Yes	Other. Specify Dusiness	Loan	-	
Part 3	List Others to Be Notified About a Debt	That You Already Listed			
is try have	nis page only if you have others to be notified aboing to collect from you for a debt you owe to some more than one creditor for any of the debts that yed for any debts in Parts 1 or 2, do not fill out or s	eone else, list the original creditor i ou listed in Parts 1 or 2, list the add	in Parts 1 or 2, then list the collection agency	y here. Similarly, if you	
Name a	and Address Or	n which entry in Part 1 or Part 2 did yo			
	· · · · · · · · · · · · · · · · · · ·		☐ Part 1: Creditors with Priority Unsecured Clai ☑ Part 2: Creditors with Nonpriority Unsecured		
	gency Plaza	,	r art z. Greditors with Northholity Offsecured	Olaii115	
Glen	Mills, PA 19342	st 4 digits of account number			
	Ld	or angles of account number			

Official Form 106 E/F

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		Document	i age oo oi o <del>-</del>	
Debtor 1	Joseph D. Rishe		_	
Debtor 2	Jenneh E. Rishe		Case number (if known)	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				lotai	Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total	Claim
	6f.	Student loans	6f.	\$	428,560.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	375,744.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	804,304.00

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Fill in this infor	mation to identify you	r case:	.,	
Debtor 1	Joseph D. Rishe			
	First Name	Middle Name	Last Name	
Debtor 2	Jenneh E. Rishe			
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	EASTERN DISTRICT C	OF PENNSYLVANIA	
Case number _ (if known)				☐ Check if the amended to

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for
2.1					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<del>_</del>
2.2	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.3					<u> </u>
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	
2.4	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
				·	

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		Document	. raye 32 Ui	J <del>4</del>	
Fill in thi	is information to identify your	case:			
Debtor 1	Joseph D. Rishe				
DCD(OI I	First Name	Middle Name	Last Name		
Debtor 2	Jenneh E. Rishe				
(Spouse if, f	filing) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	EASTERN DISTRICT OF I	PENNSYLVANIA		
Case nur	mher				
(if known)					Check if this is an amended filing
Officia	al Form 106H				
_		obtoro			4044
Scrie	dule H: Your Cod	eptors			12/15
eople ar	e filing together, both are equ	ally responsible for supply boxes on the left. Attach the	ing correct information	on. If more space is i	rate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case, do	not list either spouse a	as a codebtor.	
□ No □ Yo					
	ithin the last 8 years, have you ona, California, Idaho, Louisiana				
	o. Go to line 3. es. Did your spouse, former spo	use, or legal equivalent live w	vith you at the time?		
	☐ No ⊠ Yes.				
	In which community stat  Debtor 1 and Debtor	e or territory did you live?	California	Fill in the name a	nd current address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zip				
in lir Forn	ne 2 again as a codebtor only i	if that person is a guaranto	r or cosigner. Make s	ure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Cloud Studio Inc.			☐ Schedule D, I	ine
	PO Box 2987			Schedule E/F	, line <u>4.3</u>
	Los Angeles, CA 90078			☐ Schedule G _ Chase	
	Claud Chudia III -			Coh - dul- Du	
3.2	Cloud Studio Inc.			<ul><li>☐ Schedule D, I</li><li>☑ Schedule E/F</li></ul>	ine
	PO Box 2987 Los Angeles, CA 90078			Schedule E/F     Schedule G _	, IIIC <u>4.20</u>
	LOS Allyeles, OA 30070			II S Small Rusi	iness Administration

Fill	in this information t	to identify your ca	ase:							
	otor 1	Joseph D. R								
	otor 2 use, if filing)	Jenneh E. R				_				
Uni	ted States Bankrup	otcy Court for the	EASTERN DISTRICT	OF PENNSYLVANIA	<b>L</b>					
	se number nown)							amende uppleme		
O:	fficial Form	1061						/ DD/ Y		
	chedule I:		ome				IVIIVI	ו וטט ו	12/15	
suppos spor attac	plying correct infouse. If you are seponded a separate she	ormation. If you parated and you let to this form.	are married and not filing wi	ng jointly, and your ith you, do not inclu	spouse de infori	is liv mati	ing with yon about y	ou, incl our spo	th are equally responsible for ude information about your buse. If more space is needed, known). Answer every question	
1.	Fill in your empl information.	loyment		Debtor 1			D	ebtor 2	or non-filing spouse	
	If you have more attach a separate information about	e page with	Employment status					☑ Emplo	oyed mployed	
employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.			Occupation  Employer's name	Technology Consultant Self-Employed				Registered Nurse		
			Employer's address				OM Services, P.A.  1 Embarcadero Center 19th Floor San Francisco, CA 94111			
			How long employed tl	here?						
Par	t 2: Give De	etails About Mor	thly Income						<u>.</u>	
unle	ss you are separat	ed.	·			•		·	ace. Include your non-filing spous	
•	u or your non-filing e space, attach a s	•		ombine the information	n for all e	emplo	oyers for the	at perso	n on the lines below. If you need	
							For Debto	or 1	For Debtor 2 or non-filing spouse	
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payro deductions). If not paid monthly, calculate what the monthly wage would				2.	\$		0.00	\$	
3.	Estimate and lis	t monthly overt	ime pay.		3.	+\$		0.00	+\$ 0.00	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	0	.00_	\$ <u>7,271.00</u>	

Official Form 106I Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	Joseph D. Rishe Jenneh E. Rishe	_	Case	number (if known)			
				Foi	r Debtor 1		Debtor 2 or -filing spouse	
	Cop	y line 4 here	4.	\$_	0.00	\$	7,271.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	1,682.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	262.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	
	5e.	Insurance	5e.	\$_	0.00	\$	738.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g.	Union dues	5g.	\$_	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	+ \$_	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	2,682.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	4,589.00	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	2,764.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	+ \$_	0.00		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,764.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,764.00 + \$_	4,5	\$ <u>7,</u>	353.00
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, you or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	ır depen		. ,	,	chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The re that amount on the Summary of Schedules and Statistical Summary of Certailes						353.00
13	Do	you expect an increase or decrease within the year after you file this forn	n?				Combined monthly in	
		No. Yes Explain:						

Eill	in this informa	ation to identify yo	our case.						
				l		01			
Deb	tor 1	Joseph D. R	ishe			Cr		if this is: n amended filing	
	tor 2 ouse, if filing)	Jenneh E. R	ishe				Α		ing postpetition chapter 13 following date:
Unit	ed States Bankr	ruptcy Court for the	EASTE	RN DISTRICT OF PENNS	YLVANIA		N	IM / DD / YYYY	
l	e number nown)								
Of	fficial Fo	orm 106J				•			
So	chedule	J: Your	 Exper	ises					12/15
Be info	as complete a	and accurate as	s possible. eded, attac	. If two married people ar					r supplying correct ir name and case number
Par 1.	t 1: Descr	ribe Your House	ehold						
	☐ No. Go to ☑ Yes. <b>Doe</b> ☑ N	o line 2. es Debtor 2 live	•	ate household? al Form 106J-2, Expenses	for Separate House	e <i>hold</i> of D	ebto	or 2.	
2.	Do you have	e dependents?	⊠ No						
	Do not list Do Debtor 2.	-	_ ☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			Dependent's age	Does dependent live with you?
	Do not state dependents								□ No □ Yes
									☐ No ☐ Yes
									□ No □ Yes
							_		□ No
3.	expenses of	penses include f people other t d your depende	:han 🗌	No Yes					☐ Yes
exp app Incl valu	imate your expenses as of a blicable date.	a date after the less paid for with resistance and ha	our bankr bankruptc non-cash (	y Expenses uptcy filing date unless y y is filed. If this is a supp government assistance if ed it on Schedule I: Your	lemental <i>Schedule</i> you know the				f the form and fill in the
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgag		\$		4,219.00
	If not includ	ded in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		erty, homeowner's	-			4b.			169.00
		owner's associal		upkeep expenses dominium dues		4c. 4d.			0.00
5.				our residence, such as ho	me equity loans	5.			0.00
6.	Utilities:								
		icity, heat, natura -, sewer, garbage	-			6a.			150.00
				satellite, and cable services	6	6b. 6c.			75.00 125.00
	•	. Specify:		,		6d.			0.00

Debtor 1 Debtor 2	Joseph D. Rishe Jenneh E. Rishe	Case num	nber (if known)	
DODIOI 2		. Odde Hall	iber (ii kriowii)	_
7. <b>Foo</b>	d and housekeeping supplies	7.	\$	500.00
8. Chil	dcare and children's education costs	8.	\$	0.00
9. <b>Clot</b>	thing, laundry, and dry cleaning	9.		75.00
10. <b>Pers</b>	sonal care products and services	10.	Φ.	50.00
11. <b>Me</b> d	lical and dental expenses	11.	\$	50.00
	nsportation. Include gas, maintenance, bus or train fare.	10	•	400.00
	not include car payments.	12.		100.00
	ertainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations	13.		12.00
	G	14.	\$	0.00
	<b>rrance.</b> not include insurance deducted from your pay or included in lines 4 or 20 .   Life insurance	15a.	¢	0.00
	Health insurance	15b.	¢	0.00
	Vehicle insurance	15c.		200.00
	Other insurance. Specify:	15d.	· —	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or		Ψ	0.00
Spe	cify:	10	\$	0.00
	allment or lease payments:  Car payments for Vehicle 1	 17a.	\$	0.00
	Car payments for Vehicle 2	17b.	· —	0.00
	Other. Specify: Student Loans	4-		1,628.00
	Other. Specify:	17d. 17d.	· <del></del>	0.00
	r payments of alimony, maintenance, and support that you did not i		Ψ <u> </u>	
	ucted from your pay on line 5, Schedule I, Your Income (Official For		\$	0.00
	er payments you make to support others who do not live with you.	,	\$	0.00
Spe	cify:	19.		_
	er real property expenses not included in lines 4 or 5 of this form or			
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.		0.00
1. Oth	er: Specify:	21.	+\$	0.00
	culate your monthly expenses		<b>6</b>	7.050.00
	Add lines 4 through 21.	1061.0	\$	7,353.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form	1003-2	, ————	7.550.00
22C.	Add line 22a and 22b. The result is your monthly expenses.		<b>\$</b>	7,353.00
	culate your monthly net income.			7.050.00
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		7,353.00
230.	Copy your monthly expenses from line 22c above.	23b.	-\$	7,353.00
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	0.00
For e modi N	you expect an increase or decrease in your expenses within the year example, do you expect to finish paying for your car loan within the year or do you effication to the terms of your mortgage? No. Yes. Explain here:			ase or decrease because of a

Fill in this infor	mation to identify your c	ase:				
Debtor 1	Joseph D. Rishe					
	First Name	Middle Name	Las	t Name	<del>-</del>	
Debtor 2	Jenneh E. Rishe					
(Spouse if, filing)	First Name	Middle Name	Las	t Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F PENNSY	VANIA		
Case number						
(if known)					☐ Check if this is ar amended filing	1
Official Forr	m 106Dec					
		n Individual	Debte	or's Schedule	es	12/15
If two married pe	eople are filing together,	both are equally respor	nsible for s	upplying correct informat	ion.	
obtaining money		connection with a bank			lse statement, concealing property \$250,000, or imprisonment for up	
Sign	n Below					
Did you pa	y or agree to pay someo	ne who is NOT an attori	ney to help	you fill out bankruptcy fo	orms?	
⊠ No						
□ Yes.	Name of person			Atta	ach Bankruptcy Petition Preparer's N	otice
					claration, and Signature (Official Form	
	alty of perjury, I declare the true and correct.	hat I have read the sum	mary and s	chedules filed with this de	eclaration and	
X /s/ Jos	eph D. Rishe		Х	/s/ Jenneh E Rishe		
	h D. Rishe			Jenneh E. Rishe		
Signatu	re of Debtor 1			Signature of Debtor 2		

Date February 28, 2025

Date February 28, 2025

Fill in this	information to identify you	r case:			
Debtor 1	Joseph D. Rishe	<b>)</b>			
5.1.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Jenneh E. Rishe First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT OF	PENNSYLVANIA		
Case numb	or				
(if known)					Check if this is an amended filing
Official	Form 107				
		Affairs for Individ	duals Filing for B	ankruptcy	04/22
information		l, attach a separate sheet to		equally responsible for sup ny additional pages, write yo	
Part 1:	Give Details About Your Ma	nrital Status and Where You	ı Lived Before		
1. What is	s your current marital statu	ıs?			
	arried ot married				
2. During	the last 3 years, have you	lived anywhere other than	where you live now?		
□ No	0				
⊠ Ye	es. List all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	I.	
Debto	r 1:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	N Fuller Ave Apt 203 Angeles, CA 90046	From-To: <b>Until 2023</b>	Same as Debtor ↑		Same as Debtor 1     From-To:
states and te	e <i>rritories</i> include Arizona, Ca o	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	nity property state or territor ico, Texas, Washington and V	
Fill in th	ne total amount of income yo	nployment or from operatir u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
□ No □ Ye	o es. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ary 1 of current year until ou filed for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$6,742.00		\$7,271.00
		☑ Operating a business		☐ Operating a business	

Official Form 107

De	ebtor 2 <u>J</u>	lenneh E. Ris	he			Cas	se number (if known)		
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befor	s income re deductions and sions)	Sources of inc		Gross income (before deductions and exclusions)
		endar year: to December 31	1, 2024 )			\$22,000.00	⊠ Wages, con bonuses, tips	nmissions,	\$32,097.00
				☐ Operating a business			☐ Operating a	business	
				☐ Wages, commissions, bonuses, tips		\$53,645.00	☐ Wages, con bonuses, tips	nmissions,	\$0.00
				○ Operating a business			☐ Operating a	business	
		ndar year befo to December 31		☐ Wages, commissions, bonuses, tips		\$65,886.00	☐ Wages, con	nmissions,	\$0.00
				○ Operating a business			☐ Operating a	business	
						\$97,176.00	☐ Wages, con bonuses, tips	nmissions,	\$0.00
				Operating a business			☐ Operating a	business	
	∐ Yes	s. Fill in the deta	ils.	Debtor 1 Sources of income Describe below.	each	s income from source re deductions and	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
					exclu	sions)			
Pa	rt 3: Li	st Certain Payr	ments You	Made Before You Filed for	Bankrup	otcy			
8.	□ No.	Neither Deb individual pri  During the 9  No. Yes  * Subject to  S. Debtor 1 or  During the 9  No. Yes  Yes	nation 1 nor Demarily for a marily for a 0 days befor 5 days befor 2 or 0 days befor 6 days befor 5 days befor 5 days befor 6 days befor 7 days befor 6 days befor 6 days befor 7 days befor 6 days befor 7 days befor 7 days befor 7 days befor 6 days befor 7 days befor 9 days befor 9 days befor 6 days befor 7 days befor 6 days befor 6 days 6 d	ach creditor to whom you pa ditor. Do not include paymen payments to an attorney for t on 4/01/25 and every 3 year both have primarily const e you filed for bankruptcy, d	umer del pld purpos lid you pa lid a total nts for do this bank rs after th umer del lid you pa lid a total	ots. Consumer debise."  y any creditor a tota of \$7,575* or more mestic support oblig uptcy case. at for cases filed or ots. y any creditor a tota of \$600 or more an	al of \$7,575* or moin one or more pagations, such as class or after the date of \$600 or more.	yments and hild support and of adjustment?	the total amount you and alimony. Also, do it.
	Credito	or's Name and A	Address	Dates of payme	ent	Total amount	Amount you	Was this	payment for
						paid	still owe		

Debtor 1

	otor 1 Joseph D. Rishe otor 2 Jenneh E. Rishe			Cas	se number (i	if known)			
7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general participations of which you are an officer, direct including one for a business you operate as a support and alimony.	artners tor, pe	s; relatives of any generson in control, or ov	eral partners; partners of 20% or more	erships of we of their vot	hich you ing secur	are a gener rities; and ar	al partner; ny managing agent,	
	<ul><li>☒ No</li><li>☐ Yes. List all payments to an insider.</li></ul>								
	Insider's Name and Address	Dat	es of payment	Total amount paid	Amount still	you owe	Reason for	this payment	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos	-		ments or transfer	any proper	ty on ac	count of a c	debt that benefited an	
	<ul><li>No</li><li>Yes. List all payments to an insider</li></ul>								
	Insider's Name and Address	Dat	es of payment	Total amount paid	Amount still	you	Reason for Include cred	this payment ditor's name	
Par	t 4: Identify Legal Actions, Repossession	ns, an	d Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No								
	Yes. Fill in the details.		£41	•			0		
	Case title Case number	Nat	ure of the case	Court or agency			Status of th	ne case	
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.								
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>								
	Creditor Name and Address	Des	scribe the Property			Date		Value of the property	
		Exp	olain what happened	İ					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ⊠ No ☐ Yes. Fill in the details.			luding a bank or fi	inancial ins	titution,	set off any	amounts from your	
	Creditor Name and Address	Des	scribe the action the	creditor took		Date ac	ction was	Amount	
12.	2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  □ No □ Yes								
Par	t 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrup  ☑ No ☐ Yes. Fill in the details for each gift.	otcy, c	lid you give any gift	s with a total value	e of more th	nan \$600	per person	7.5	
	Gifts with a total value of more than \$600 per person		Describe the gifts			Dates y	you gave	Value	
	Person to Whom You Gave the Gift and								

	otor 1 Joseph D. Rishe Jenneh E. Rishe		Ca	ase number (i	f known)	
14.	Within 2 years before you filed for bankru  ☐ No ☐ Yes. Fill in the details for each gift or co	_		s with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrup disaster, or gambling?	tcy or	since you filed for bankruptcy, did yo	ou lose anyt	hing because of the	ft, fire, other
	<ul><li>☑ No</li><li>☐ Yes. Fill in the details.</li></ul>					
	how the loss occurred	nclude	be any insurance coverage for the lost the amount that insurance has paid. List ce claims on line 33 of Schedule A/B: F	st pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers					
	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or prediction prediction and attorneys, bankruptcy petition prediction in the details.	eparir	ng a bankruptcy petition?			erty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment
	Sadek Law Offices LLC 1500 JFK Blvd. Ste 220 Philadelphia, PA 19102 Brad@sadeklaw.com		Attorney Fees and Costs		01/28/2025	\$5,000.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	tors o	r to make payments to your creditors		r transfer any prope	erty to anyone who
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Person Who Was Paid Address		Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment
18.	3. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No					
	Yes. Fill in the details.  Person Who Received Transfer  Address		Description and value of property transferred		ny property or received or debts change	Date transfer was made
	Person's relationship to you			, oxe		
19.	Within 10 years before you filed for bankribeneficiary? (These are often called asset-p  ⊠ No □ Yes. Fill in the details.			elf-settled tru	st or similar device	of which you are a
	Name of trust		Description and value of the proper	rty transferre	ed	Date Transfer was made

	btor 1 Joseph D. Rishe btor 2 Jenneh E. Rishe			Case num	ber (if known)	
Par	rt 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Sto	orage Unit	s	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details.	other financial accour	nts; certificates	of deposi		
		Last 4 digits of account number	Type of accou instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depositor cash, or other valuables?					itory for securities,	
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?
22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankrupto  ☑ No ☐ Yes. Fill in the details.					cy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	Address (Number, Street, City,			Do you still have it?
Par	rt 9: Identify Property You Hold or Control fo	or Someone Else				
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ide any propert	y you bor	rowed from, are storing	for, or hold in trust
	<ul><li>☑ No</li><li>☐ Yes. Fill in the details.</li></ul>					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	rt 10: Give Details About Environmental Infor	rmation				
For ⊠	the purpose of Part 10, the following definition  Environmental law means any federal, state,	or local statute or regu				
$\boxtimes$	toxic substances, wastes, or material into the regulations controlling the cleanup of these site means any location, facility, or property to own, operate, or utilize it, including dispose Hazardous material means anything an envir hazardous material, pollutant, contaminant, or	substances, wastes, or as defined under any e al sites. onmental law defines a	material. environmental la	aw, wheth	er you now own, operate	e, or utilize it or used
Rep	ort all notices, releases, and proceedings that	you know about, rega	rdless of when	they occu	ırred.	
24.	Has any governmental unit notified you that	you may be liable or po	otentially liable	under or i	in violation of an environ	mental law?
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental uni			onmental law, if you it	Date of notice

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	otor 1 Joseph D. Rishe otor 2 Jenneh E. Rishe		Case number (if known)		
25.	Have you notified any governmental unit of	any release of hazardous material?			
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	, ,	Date of notice	
26.	Have you been a party in any judicial or adr	ministrative proceeding under any env	vironmental law? Include settlements an	d orders.	
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)		Status of the case	
Par	t 11: Give Details About Your Business or	Connections to Any Business			
<ul> <li>27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any bus</li></ul>					
	Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed		
	Endometriosis Coalition Inc. 120 S 21st Street Box 333 Philadelphia, PA 19103	IRC 170(b)(1)(A)(vi) Public Charit			
	Cloud Studio Solutions Inc. 120 S 21st Street Box 333 Philadelphia, PA 19103	Software Consulting	EIN: From-To 2024 to present		
	Cloud Studio Inc. PO Box 2987	Software Consulting	EIN: 47-4433157		
	Los Angeles, CA 90078		From-To 2015 to present		
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.  ☑ No ☐ Yes. Fill in the details below.	tcy, did you give a financial statement	to anyone about your business? Includ	e all financial	
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			

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Debtor 1	Joseph D. Rishe		-
Debtor 2	Jenneh E. Rishe		Case number (if known)
Part 12:	Sign Below		
are true a with a bar		atement, d	d any attachments, and I declare under penalty of perjury that the answers concealing property, or obtaining money or property by fraud in connection isonment for up to 20 years, or both.
/s/ Jose	ph D. Rishe	/s/ Jen	neh E Rishe
Joseph	D. Rishe	Jenneh E. Rishe	
Signatur	e of Debtor 1	Signatu	re of Debtor 2
Date	February 28, 2025	Date	February 28, 2025
Did you a ⊠ No □ Yes	ttach additional pages to Your Statement of Fil	nancial Ai	ffairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you p ⊠ No	pay or agree to pay someone who is not an atto	rney to he	elp you fill out bankruptcy forms?
☐ Yes. N	ame of Person Attach the Bankruptcy Pet	ition Prepa	arer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your	case:			
Debtor 1	Joseph D. Rishe	Middle Name	Last Name		
Debtor 2	Jenneh E. Rishe	Middle Name	Lastivalle		
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court for the:	EASTERN DISTR	RICT OF PENNSYLVANIA	_	
Case number					
(if known)				Check if this is an	
				amended filing	
Official For	rm 108				
Statemen	nt of Intentio	n for Indiv	iduals Filing Under Ch	apter 7 12/15	5
Otatomor	it or intoritio	ii ioi iiiaii	ridadio i ming ondor on		
If you are an indi	vidual filing under chap	oter 7. vou must fil	ll out this form if:		
	claims secured by yo	ur property, or			
	ed personal property a		ot expired. you file your bankruptcy petition or by the	data and for the meeting of avaditors	
			e time for cause. You must also send copie		
on the f	form				
	ople are filing together d date the form.	in a joint case, bo	oth are equally responsible for supplying co	rrect information. Both debtors must	
•					
	and accurate as possib our name and case nun		s needed, attach a separate sheet to this for	rm. On the top of any additional page:	s,
write ye	our manne and case man	iber (ii kilowii).			
Part 1: List Yo	our Creditors Who Have	Secured Claims			
1 For any credito	ors that you listed in Pa	ert 1 of Schedule D	): Creditors Who Have Claims Secured by P	Property (Official Form 106D) fill in th	Δ
information be	low.		·		
Identify the cre	editor and the property th	nat is collateral	What do you intend to do with the proper secures a debt?	rty that Did you claim the proper as exempt on Schedule	•
			occured a debt.	as exempt on concaute	Ο.
Creditor's Po	ennymac Loan Servi	cos IIC	☐ Surrender the property.	⊠ No	
name:	ennymac Loan Servi	ces, LLC	Retain the property and redeem it.	⊠ 140	
5			☐ Retain the property and enter into a	☐ Yes	
Description of property	336 S. Juniper Stre Philadelphia, PA	et,	Reaffirmation Agreement.  Retain the property and [explain]:		
securing debt:	rilliaueipilia, rA		pay		
	our Unexpired Personal		in Schedule G: Executory Contracts and U	noveriend Lange (Official Form 106C)	£:II
			in Schedule G: Executory Contracts and U expired leases are leases that are still in ef		
			the trustee does not assume it. 11 U.S.C. §		
Describe your u	nexpired personal prop	orty loseos		Will the lease be assumed?	
Describe your u	nexpired personal prop	city leases		Will the lease be assumed:	
Lessor's name:				☐ No	
Description of lea	sed			☐ Yes	
Property:				00	
Lessor's name:				□ No	
Description of lea	sed			☐ Yes	
Property:					
Lessor's name:				□ No	
Description of lea Property:	sed			☐ Yes	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Joseph D. Rishe Debtor 2 Jenneh E. Rishe	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicate property that is subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
X /s/ Joseph D. Rishe	X /s/ Jenneh E Rishe
Joseph D. Rishe Signature of Debtor 1	Jenneh E. Rishe Signature of Debtor 2
Date February 28, 2025	Date February 28, 2025

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

	\$1,167	filing fee
+	\$571	administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court Eastern District of Pennsylvania**

T	Joseph D. Rishe Jenneh E. Rishe		Core No				
In re	Jennen E. Risne	Debtor(s)	Case No. Chapter	7			
	DISCLOSURE OF COMPI	ENSATION OF ATTOI	NEV FOD NI	FRTOD(S)			
1							
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compens paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	5,000.00			
	Prior to the filing of this statement I have received	d	\$	5,000.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	☐ Debtor ☐ Other (specify):						
3.	The source of compensation to be paid to me is:						
	☐ Debtor ☐ Other (specify):						
4.	☑ I have not agreed to share the above-disclosed con	npensation with any other person	unless they are mem	bers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compen of the agreement, together with a list of the names						
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptcy of	ease, including:			
	<ul><li>a. Analysis of the debtor's financial situation, and ren</li><li>b. Preparation and filing of any petition, schedules, st</li><li>c. Representation of the debtor at the meeting of cred</li><li>d. [Other provisions as needed]</li></ul>	atement of affairs and plan which	may be required;				
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtor in advers			) <b>.</b>			
		CERTIFICATION					
	I certify that the foregoing is a complete statement of a ruptcy proceeding.	ny agreement or arrangement for	payment to me for re	presentation of the debtor(s) in this			
	February 28, 2025	/s/ Brad Sadek					
Date		Brad Sadek					
		Signature of Attorne Sadek Law Office					
		1500 JFK Blvd. S					
Philadelphia, PA 19102 (215) 545-0008 Fax: (215) 545-0611							
		Brad@sadeklaw.		•			
		Name of law firm					

# **United States Bankruptcy Court Eastern District of Pennsylvania**

	Joseph D. Rishe			
In re	Jenneh E. Rishe		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR	MATRIX	
The abo	ove-named Debtors hereby verify th	nat the attached list of creditors is true and o	correct to the best	of their knowledge.
Date:	February 28, 2025	/s/ Joseph D. Rishe		
		Joseph D. Rishe		
		Signature of Debtor		
Date:	February 28, 2025	/s/ Jenneh E Rishe		

Jenneh E. Rishe Signature of Debtor Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

Pennsylvania Department of Revenue Attn: Bankruptcy Division Department 280946 Harrisburg, PA 17128

Attorney General of the United States Ben Franklin Station PO Box 227 Washington, DC 20044

Pennsylvania Office of Attorney General Attn: Financial Enforcement Section Strawberry Square, 15th Floor Harrisburg, PA 17120

Pennsylvania Office of General Counsel 333 Market St Fl 17 Harrisburg, PA 17101

U.S. Attorney's Office 615 Chestnut Street, 12th Floor Philadelphia, PA 19106

Amex Correspondence/Bankruptcy PO Box 981535 El Paso, TX 79998-1535

Chase MailCode LA4-7100 700 Kansas Ln Monroe, LA 71203-4774

City of Philadelphia 1401 John. F Kennedy Blvd., 5th Floor Philadelphia, PA 19102

Cloud Studio Inc. PO Box 2987 Los Angeles, CA 90078

Drexel University 3141 Chestnut Street Philadelphia, PA 19104

Main Line Health 100 East Lancaster Avenue Wynnewood, PA 19096

MOHELA P.O. Box 790233 Saint Louis, MO 63179 Nelnet PO Box 82505 Lincoln, NE 68501

PECO Attn: Bankruptcy 2301 Market Street Philadelphia, PA 19103

Penn Medicine PO Box 824406 Philadelphia, PA 19182

Pennymac Loan Services, LLC Attn: Correspondence Unit PO Box 514387 Los Angeles, CA 90051-4387

Philadelphia Gas Works 800 W. Montgomery Avenue, 3F Philadelphia, PA 19122

Quest Diagnostics 500 Plaza Drive Secaucus, NJ 07094

Sofi Lending Corp/Mohela Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005-1243

U.S. Small Business Administration ATTN: District Counsel Philadelphia District Office 660 America King of Prussia, PA 19406

Watson & Allard, PC 24 Regency Plaza Glen Mills, PA 19342